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CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES UNDER ARTICLE 44 OF THE CONVENTION

Initial report of States Parties due in 1993

Addendum

YEMEN

[14 November 1994]

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## Introduction

1. Yemen having ratified the Convention on the Rights of the Child in 1991, Yemeni society is expected to fulfil its obligations towards children and to provide the means for their welfare and protection. However, the problems now facing children in that society are such that a review of the laws and legislative acts is required, as is increased government and foreign support aimed at the social and cultural development of the family and the improvement of its health so that children may lead decent lives.

2. Using the articles of the Convention as a basis for comparison, this report endeavours to outline some of the problems and difficulties confronting children in Yemeni society and to discuss existing legal practices in a critical and analytical light with reference to those problems and difficulties in an attempt to define and resolve them.

3. Yemeni society, which declared the unification of its two parts in 1991, has faced various predicaments and challenges, both at home and abroad, that have played a part in reducing the variety and number of services provided by the Government to Yemeni children. The recent events in Yemen also disrupted various development projects and had adverse effects on the economic and social structure, meaning that more support and assistance is required if society is to overcome its children's problems.

4. Various difficulties were encountered in the preparation of this report: precise statistics were scarce and contradictory; exact information, particularly concerning victims of the armed conflict imposed on Yemeni society, was hard to obtain; and accurate facts and surveys on disabled children and young persons in remote rural areas were unavailable.

5. The main distinctive feature of this report is its objectivity; instead of merely noting what the State provides it critically analyses various aspects of existing institutions and services so that the State can effectively identify the weaknesses of its child programmes and policies and endeavour to overcome all shortcomings in the future, particularly now that it has emerged from the stage of political crisis and is taking steps to modernize and develop social and cultural institutions.

6. This report has been prepared by a working group instructed by various government ministries under the supervision of the Deputy Head of the Social Development Section at the Ministry of Social Security and Labour.

# I. EVALUATION OF CHILD PROGRAMMES IN THE REPUBLIC OF YEMEN OVER A TWO-YEAR PERIOD IN THE LIGHT OF THE CONVENTION ON THE RIGHTS OF THE CHILD

## A. Legislative acts in the Republic of Yemen and the Convention on the Rights of the Child

7. In the light of international concern for the rights of the child and the convening of the World Summit for Children in September 1990, State leaders undertook to end child mortality and the spread of malnutrition by the year 2000 and to provide essential protection for the physical and mental development of all children throughout the world.

8. The principle of ending child mortality and the spread of malnutrition is clearly relevant to all areas of the world in the 1990s as embodied in the Convention on the Rights of the Child, which the United Nations adopted in November 1989 and which, by the end of 1991, had been ratified by over 50 States and signed by more than 130 others. Among the States ratifying the Convention was the Republic of Yemen, which did so on 26 January 1991 by way of Act No. 3 of 1991.

9. Three fundamental rights are covered under the Convention: the right of the child to survival, development and life. Comparing the articles of the Convention with the legislative acts of the Republic, we find that the Yemeni legislature has complied with the charters of the United Nations and international organizations working for the protection of human rights. The provisions contained in the legislative acts of the Republic are, moreover, consistent with the Convention on the Rights of the Child as guaranteed by the aims of the revolution and the Constitution. The sixth aim of the revolution calls for respect for the charters of the United Nations and international organizations, adherence to the principles of positive neutrality and non-alignment, and endeavours to establish world peace and promote the concept of coexistence among nations.

### 1. The Constitution of the Republic of Yemen

10. On 28 September 1994, the House of Representatives adopted constitutional amendments which created great interest in the structure of the new Yemeni society. Article 19 of the Constitution stipulates that the State shall guarantee equal political, economic, social and cultural opportunities for all and shall promulgate legislation to that end. In the amendments, an article has been added which stipulates that Yemeni society is founded on social solidarity based on justice, freedom and equality according to the law.

11. The Constitution considers that "the family, which is rooted in religion, morality and patriotism, is the cornerstone of society; the law shall safeguard the family entity and strengthen family ties, and the State shall protect mothers and children, as well as juveniles and young persons". It also considers that education, health and social services are essential foundations for the shaping and advancement of society, foundations which society helps to provide in conjunction with the State.

12. Part II is devoted to the basic rights and duties of citizens. Article 27 states that "all citizens are equal in regard to their public rights and duties". Article 32 (a) stipulates that "the State shall guarantee the personal liberty of citizens and shall safeguard their dignity and security. The law shall specify the cases in which the liberty of citizens is restricted. No person may be confined other than by a ruling of a competent court".

13. Article 37 affirms that:

> "education is a right of all citizens guaranteed by the State in accordance with the law through the establishment of various schools and cultural and educational institutions. Education at the primary stage shall be compulsory ... The State shall endeavour to eradicate illiteracy and shall devote attention to the expansion of technical and vocational education ... . The State shall also devote attention to the welfare of young persons, protect them from delinquency, provide them with religious, intellectual and physical education and provide a suitable environment for the development of their talents in all fields".

14. Health care is also regarded as a right of all citizens, which:

> "the State shall guarantee through the establishment and expansion of various hospitals and health institutions. The law shall regulate the medical profession, the expansion of free health services and the promotion of health awareness among citizens".
>
> "The State shall also guarantee the provision of social security for all citizens in cases of illness, infirmity, unemployment, old age and loss of the provider ... particularly for families of martyrs, in accordance with the law."

15. These articles are consistent with articles 2, 3, 4, 5, 19, 24, 25, 26 and 28 of the Convention on the Rights of the Child.

### 2. The Civil Code (Act No. 19 of 1992)

16. Article 28 of the Civil Code (Act No. 19 of 1992) stipulates that the personality of the individual shall commence at the time of his live birth and shall end at his death. A comparison shows that this provision is consistent with article 1 of the Convention on the Rights of the Child, which states that "a child means every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier". This provision of the Convention takes into account the right of States to determine the age of majority, particularly Muslim countries which specify the age of majority as 15 years. Article 5 of the Civil Code (Act No. 19 of 1992) stipulates that the age of majority is 15 full years if the person who attains that age has the use of his mental faculties, is rational in his behaviour and is fully competent to exercise his civil rights. Special legislation may stipulate a higher age whereby a person is entitled to the exercise or enjoyment of any other rights, as indicated in Electoral Act No. 2 of 1990, article 13 of which specifies the minimum age of the voter as 18 years.

17. Article 7 of the Convention stipulates that "the child shall be registered immediately after birth and shall have the right from birth to a name and the right to acquire nationality", the equivalent of which is provided under the following articles of the Civil Code: article 38, which specifies when the personality of the individual commences; article 39, which stipulates that birth and death shall be entered in the official registers designed for that purpose; and article 50, which specifies two types of competence, namely, the competence necessary for the individual to exercise his legitimate rights as established since his birth and the competence whereby the individual exercises the civil rights which are his in accordance with other articles contained in the Civil Code. Article 8 of the Convention stipulates that "States Parties undertake to respect the right of the child to preserve his or her identity, including nationality, name and family relations". The equivalent to that article is contained in article 46 of the Civil Code, which stipulates that, in transactions, the individual shall be known by his name, the name of his father and the name of his grandfather, or by a designation that distinguishes him. The Code regulates the method for the registration of individuals and their names and designations.

### 3. The Personal Status Act No. 20 of 1992

18. Article 9 of the Convention stipulates that "States Parties shall ensure that a child shall not be separated from his or her parents against their will". Similarly, article 138 of the Personal Status Act No. 20 of 1992 states that "custody means the care and upbringing of a young person who is unable to manage his or her own affairs, and protection of the said young person from harm or danger, in a manner consistent with the rights of his or her guardian. It is an inalienable right of the child which, if precluded by any particular circumstances, is nevertheless restored when those circumstances change".

19. Article 140 of the Act stipulates that the guardian shall be a rational and trustworthy adult who is capable of undertaking the physical and moral upbringing and protection of the young person. It also stipulates that, if the guardian is a woman, in addition to the above, she should not have renounced Islam, should not undertake charge of the young person in the home of anyone who is ill-disposed towards him and should not be so busy outside the home that she is unable to devote attention to the custody unless there is someone present to cater for the young person's needs. If the guardian is a man, he should have religious leanings.

20. Article 141 stipulates that the mother has a greater right to custody of her child, provided that she is found fit to undertake that custody, and she cannot forfeit this right unless the child accepts a person other than her, nor may her marriage to another person preclude her where there is no person other than her. Similarly, her right to custody shall not be denied by reason of her poor moral character until the young person attains the age of five years.

21. Article 148 of the Act gives the child the right to choose between his father and his mother to act as his guardian in the event of a dispute between them, with a view to the child's interests. In the event of a dispute between

guardians other than the father or mother, the judge shall, after consulting the child, choose the person most capable of furthering the child's interests.

### 4. The Juvenile Welfare Act No. 24 of 1992

22. Under article 37 of the Convention, "no child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment. Neither capital punishment nor imprisonment without possibility of release shall be imposed for offences committed by persons below 18 years of age;". Similarly, "no child shall be deprived of his or her liberty unlawfully or arbitrarily ... every child deprived of liberty shall be treated with humanity and respect". Comparing this article with the legislation of the Republic of Yemen, we find that, under the Juvenile Welfare Act No. 24 of 1992, a juvenile is defined as any person who is not more than 15 full years of age at the time of perpetrating an act that the law designates as criminal (art. 2). Under article 3, a juvenile is deemed to be delinquent in specific instances, including the following:

(a) If he is found begging;

(b) If he associates with delinquents or rogues;

(c) If he habitually runs away from home or plays truant from school;

(d) If he engages in acts characterized by licentiousness, depravity or moral corruption.

23. Article 11, paragraph 3, stipulates that a juvenile under 12 years of age may not be detained in a police station or by any security organ and must be assigned to the care of his parents, his guardian or his trustee. If that is impossible, he must be placed in the nearest juvenile rehabilitation home for a period of not more than 24 hours. If his release constitutes a danger to himself or to others, he must thereafter be referred to the Office of the Public Prosecutor for consideration of his case in accordance with the provisions of the Act. Under paragraph (b) of the same article, a juvenile who has attained the age of 12 years may be detained in any police station, provided that the period of detention does not exceed 24 hours and that he is detained in a particular location that prevents him from mixing with other detainees who are older than him.

24. Article 14 states that a juvenile may not be ill-treated or placed in chains. It also prohibits enforcement by means of physical coercion and safeguards the dignity of the juvenile, even if he has committed a crime punishable by law. Article 37 stipulates that, if a juvenile who is over 14 but under 15 years of age commits a crime punishable by the death penalty, he shall be sentenced to a term of imprisonment of not less than 10 years, thereby ensuring that juveniles aged between 14 and 15 years are not sentenced to the death penalty. These provisions are consistent with provisions contained in the Convention in that connection, such as articles 16, 33, 37 and 40. One article of the Act stipulates that a juvenile court should be constituted in each governorate by a decision of the Minister of Justice. Notwithstanding their importance, however, such courts have not yet been established.

## 5. The Nationality Act No. 6 of 1990

25. Articles 7 and 8 of the Convention concern the right of the child to acquire nationality, the right from birth to a name and the right to preserve his or her identity. The provisions of the Nationality Act No. 6 of 1990 are consistent with the provisions of the Convention in that respect; article 3 of the Act stipulates that Yemeni nationality shall be enjoyed by:

(a) Any person born to a father who enjoys that nationality;

(b) Any person born in Yemen to a mother holding that nationality and a father who is stateless or of unknown nationality;

(c) Any person born in Yemen to a mother holding that nationality and a father whose nationality has not been legally established;

(d) Any person born in Yemen to unknown parents. A person born in Yemen shall be deemed to be Yemeni unless evidence to the contrary is produced;

(e) Any expatriate holding Yemeni nationality on his departure from the national territory who has not relinquished that nationality in accordance with the law and at his explicit request, even if he has acquired the nationality of the country of his residence under its laws.

26. Although these provisions under the said paragraphs of article 3 are satisfactory, they do not entitle the children of a Yemeni woman married to a foreigner to enjoy Yemeni nationality as their birthright. Assuming, therefore, that a Yemeni woman marries a foreigner whose country's laws stipulate that nationality is acquired only by a person born to two parents having that same nationality, the children of the Yemeni woman would, in that case, be stateless. We note that, under article 4 of the Act, Yemeni nationality may be granted by presidential decree, based on a proposal by the Minister, to a person born abroad to a mother holding that nationality and a father who is stateless or of unknown nationality. We also note that here also the problem still exists.

## 6. Labour Act No. 5 of 1970 promulgated at Sana'a

27. The Act stipulates that the working hours of young persons must not exceed 6 hours per day or 24 hours per week. Young persons must not be required to work overtime or on weekly rest days, official holidays or other periods of leave. Article 45 of the draft Labour Act prohibits the employment of young persons in arduous or harmful occupations or industries.

28. Article 19 of the Basic Labour Code (Act No. 141 of 1978) promulgated at Aden prohibits the employment of young persons up to 16 years of age who have not completed their basic education unless special approval is granted by the Minister after each case has been considered on its merits in the light of a special social study and report.

## 7. The draft Care and Rehabilitation of the Disabled Act

29. Article 23 of the Convention affirms that States Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, as well as special care, and shall encourage and ensure the extension to the eligible child and those responsible for his care of assistance that is provided free of charge. The disabled child should also be assured of receiving education and training in accordance with this article. Although a Care and Rehabilitation of the Disabled Act was drafted by the competent persons at the Ministry of Social Security and Labour, it has not yet appeared, even though it was one of the first to be submitted to the House of Representatives for approval and promulgation immediately after the unification. Article 5 of the draft stipulates that all categories of disabled persons shall, according to their individual needs, be entitled to one or more of the following benefits:

(a) Welfare;

(b) Remedial equipment;

(c) Education;

(d) Rehabilitation or retraining;

(e) Suitable work in the case of those with vocational qualifications, those who have been rehabilitated and those who are educated;

(f) Follow-up in the case of those who are employed to ensure that they are settled in their jobs;

(g) Tax exemption in the case of those who are employed;

(h) Enjoyment of concessional use of the various means of public transport;

(i) Exemption from customs duty for aids, equipment and educational and training materials which they are obliged to import on account of their disability;

(j) Facilitated access to and mobility in public places.

30. Under article 11 of the draft act, disabled persons who have attained the age prescribed for compulsory education are entitled to receive all stages of that education, while those who are illiterate and above the official age are entitled to enrol in illiteracy programmes in the same way as their able-bodied peers. Through the Ministry of Social Affairs and Labour, the State undertakes to establish special homes, centres and institutes for the care and rehabilitation of disabled persons (art. 7).

31. Under article 21, a disabled person whose rehabilitation is complete is entitled to take up employment that is commensurate with his level of rehabilitation. State institutions and the private sector are required to employ disabled persons under the Civil Service Act No. 19 of 1991, article 24

of which stipulates that "each administrative unit shall be required to appoint disabled persons to posts commensurate with their capabilities within a specific ratio determined annually by the Ministry with a view to their integration into society and their participation in social development".

32. Despite the promulgation of these legislative acts, their many positive aspects and their consistency with international conventions, in particular the Convention on the Rights of the Child, ratified by Yemen, which participated in the International Conference on the Rights of the Child, they have not been applied in practice and remain largely unenforced.

## B. Economic and political aspects

33. Yemen's ratification of the Convention on the Rights of the Child in 1991 brought about the establishment of the Yemeni Council for Maternal and Child Welfare in that same year and the adoption, in 1992, of the population strategy covering mothers, children and family planning. However, despite all attempts by the State to provide welfare, protection and educational and health services for children, the objectives were not achieved, as the political and economic situation in Yemen overshadowed the lives and future of children in Yemen and had adverse repercussions on their social condition, as follows:

### 1. The economic situation

34. Following unification, the country experienced difficult economic circumstances attributable to both internal and external factors. At the internal level, government spending rose with the increase in the number of State employees, while the unplanned growth of service projects led to continued reliance on imports and a rise in the external debt, which reached US$ 14 billion, amounting to the previous total debt of the two separate States. At the external level, the disastrous Gulf war adversely affected the national economy, which had been bolstered by an annual US$ 2 billion in remittances from expatriates. The suspension of remittances from abroad and Arab and international assistance led in turn to the suspension of various projects aimed at tackling population growth, which entailed a large financial deficit for the State. The situation was further exacerbated by limited production and exports. Difficult economic circumstances detrimental to the population in general and children in particular were thus imposed in the form of inflation and the disappearance of various essential commodities, such as milk and medicines, that had its worst effect on children. The most notable symptoms of this deterioration were:

A decline in annual per capita income to US$ 55;

A rise in the dependency rate, which reached 126 per cent;

A rise in the number of family members to an average of 5.8 per cent;

A rise in the unemployment level to 36 per cent;

A greater incidence of begging among children, some of whom are physically mutilated by their relatives in order to force them to beg.

35. Although the Convention may require the protection of children from all forms of economic exploitation, harsh economic conditions are not easily tackled by mandatory decree. The circumstances imposed by such conditions produced a social and economic upheaval in various fields in which children were among the victims, despite the existence of legislation guaranteeing protection from all forms of child exploitation.

### 2. Political conflicts and wars

36. The disastrous Gulf war, which forced some 1 million Yemeni expatriates to leave their jobs and sources of income and return without compensation to Yemen, had a far-reaching effect on numerous families and children. Over 56.5 per cent of returnees were dependent children.

37. Internal wars and internal conflicts had a catastrophic effect on children. The events of January 1986 left many people injured and mutilated and also caused the migration and displacement of many families towards the northern regions. In addition, the loss of the family provider led to homelessness among children, who were thus forced to work or beg.

38. As a result of the April 1994 war, a large number of families were displaced from the combat zones, leaving behind them many demolished homes. They were also accompanied by various people who were injured or disabled, most of them children either disabled or totally incapacitated by their injuries.

39. In addition to these adverse circumstances, the internal wars and conflicts caused painful mental distress to those people and also affected their food and medication. The expenditure on the above two wars exceeded the overall debt of the State, and those displaced families undoubtedly lost stability and security. This human and psychological aspect reflects the extent to which women and children suffer as a result of war. According to the estimate of the World Health Organization representative, Yemen needed about US$ 22 million in humanitarian requirements to deal with the effects of the war during the period from August 1994 to February 1995 alone. This included health services, water, environmental health, emergency food assistance, education, child welfare and minefield clearance at Aden and Abyan. The report stated that over 375,000 inhabitants, most of them children, were suffering from the results of the war.

40. The loss of life and equipment was extremely costly, in addition to which public funds which should have been spent on development and on repairing the economic infrastructure were used for military purposes.

41. The adverse effects of the internal conflict included:

An increase in the number of injured and disabled children;

A rise in the number of beggars and homeless persons;

A rise in the number of school drop-outs in order to meet basic needs;

A rise in the number of child deaths;

An increase in the number of children employed before adulthood.

42. Accurate statistics concerning the number of dead and wounded and the material losses resulting from this armed conflict have not yet been published, although the competent authorities are expected to announce them eventually. However, an enormous number of families have most certainly been displaced from their places of origin, particularly areas where battles took place, damaging their homes and amenities and making schools vulnerable to looting and sabotage.

43. For a period of one month, international organizations supplied food aid and blankets to some 2,000 displaced families and also helped to administer first aid to the injured, as well as to provide treatment. Various national charities played a humanitarian role in supplying relief for victims which included food, medication, tents and blankets.

## C. Educational programmes and policies

44. The Yemeni State guarantees equal educational rights for both sexes under the provisions of the Unified Education Act of 1993. It also guarantees free education and is endeavouring to achieve the principle of equal opportunities and compulsory education at the basic stage (1-9). The statistical indicators, however, clearly show the various problems facing child education, which can be summarized as follows.

### 1. The rise in the illiteracy rate

45. In 1991-1992, the illiteracy rate was 55.3 per cent among sections of the population aged 10 years and over, amounting to 77.8 per cent among females and 32 per cent among males at the overall level, 93 per cent among females and 49 per cent among males at the rural level, and 70 per cent among females and 38 per cent among males at the urban level.

46. The State adopted the 1981 national literacy campaign (Sana'a) and the 1984 comprehensive national literacy campaign (Aden) and an executive body was established with the task of coordinating official and popular efforts in the field of literacy and adult education. The objectives of the efforts to eradicate illiteracy, however, have not been achieved, since not all children can be accommodated in education, nor do they all continue with it, particularly in the case of females. In addition, educational opportunities differ between the sexes, as they do between rural and urban areas. Illiteracy is therefore mainly among females, given the contrasting enrolment rates between males and females and between rural and urban areas. The illiteracy rate is 54.3 per cent among 10-14 year-olds and 60.4 per cent among 15-16 year-olds (see annex II).

47. Despite the positive enrolment rates for female students compared to geographical distribution (rural/urban) which indicate that 60 per cent of

all enrolled students are rural inhabitants, enrolment rates gradually decline at the end of schooling, meaning that only small numbers of illiterate persons stay on to complete their education to the end of the follow-up stage.

48. Statistics show a slight fall in illiteracy every five years. In 1976, illiteracy was widespread, amounting to 87.5 per cent, while for inhabitants aged 10 and above it was 98 per cent among females and 75.5 per cent among males. However, 10 years of continuous efforts point to the failure of the mechanisms used to free people from illiteracy. This applies particularly to females, since the campaign was not conducted in tandem with a similar plan to improve basic education. The population pyramid for 1992 shows that 60 per cent of the population is of school age. In addition, although the population is increasing by an annual 3 per cent, there is no corresponding increase in educational resources. The illiteracy rate is therefore expected to remain static for the next five years, particularly in view of the delay in implementing measures that could help to surmount the difficulties that face girls' entry into education, such as increasing the absorption capacity in basic education, attempting to reduce drop-out rates from the first grades and applying the principle of compulsory education from the age of six, as provided for in the education legislation.

### 2. Education at the first stage (basic education)

49. The number of students in basic education is noticeably increasing; in the 1991/92 academic year, the total amounted to 2,272,578 students, 167,147 of them female and 575,431 of them male. In the 1981/82 academic year, 49 per cent of 6 to 15 year-olds were enrolled in the basic education stage, only 12 per cent of them female, whereas in the 1991/92 academic year, 57.5 per cent of the overall number of 6 to 15 year-olds were enrolled, meaning that an estimated 42.5 per cent of children of compulsory school age, most of them female, still do not attend school.

50. It is noteworthy that at this stage the quantitative growth is positive among males and somewhat slow among females; the overall picture is that among females of compulsory school age, only 32 per cent were enrolled in education, whereas among males of the same age the figure amounted to 85 per cent.

51. At the quantitative level, the number of females aged between 6 and 15 years who were enrolled in the basic stage of education in the 1991/92 academic year amounted to only 27.5 per cent of the total number enrolled in that stage. This has adverse consequences for the subsequent stages of education, which are affected by the level of enrolment in basic education since it amounts to 17 per cent of the total number of 16 to 18 year-olds enrolled in the secondary stage.

52. At the regional level, the urban to rural enrolment ratio in the first stage rises to 40 per cent in towns, whereas in some rural areas it declines to less than 10 per cent and falls even lower in the higher grades. Altogether, there are 52,496 teachers in basic education, 9,737 of whom are female, representing 18.5 per cent. Most of the 13,665 schools are mixed, although 8.6 per cent are single-sex schools for girls only.

### 3. Completion of schooling

53. The likelihood of children completing their schooling is poor for various social and economic reasons, which include early marriage, the need for girls from rural families to perform agricultural and domestic work in a society that is predominantly rural, and the refusal of families to allow girls to attend schools that are far from their homes, have no female teachers or are not single-sex girls' schools. While 8.6 per cent of schools in basic education and 6.2 per cent in secondary education are for girls only, in rural areas they amount to only 1.5 per cent.

54. Between 1985 and 1990, the average pass rate of those sitting first-certificate examinations in basic education ranged between 80 and 85 per cent, but fell to 55 per cent among those sitting second-certificate examinations. In addition to the difficulty of repeating the same class or level, statistics indicate that education is lost in various ways, such as truancy and drop-out. Between 1977 and 1983, education was lost at the rate of about 60 per cent in the primary stage, whereas between 1985 and 1990 it was 65.8 per cent between the first and ninth grades in that stage. This high rate begins after completion of the first grade in the first stage and gradually increases among females to reach its peak between the fourth and sixth grades for various reasons, including the social attitude towards girls' education and the poor economic returns from such education, particularly since the curricula have little connection with the environment or with training and qualification and since education is scarcely available to females in remote areas where services are lacking. Schools may stop after or at the third-grade level because the building is either inadequate or unsuitable. Students are consequently transferred to a higher school in areas that are further away and beyond the financial resources of the family. Social barriers cannot therefore be broken down.

55. Given the rise in the rate of educational loss in the first stages of basic education, amounting to 90 per cent among females in the southern and eastern governorates and 70 per cent in the northern and western governorates, overall illiteracy among females is expected to escalate, particularly when combined with the factors of population growth and the modest educational resources, which are non-existent in some rural areas, with male and female drop-outs added to the high numbers of illiterate adults.

### 4. The decline in the number of teachers

56. The importance of child education can be gauged by teacher-training activity, the number of teachers having noticeably fallen as a consequence of teacher-training conditions in general. In the 1980/81 academic year, only 11 per cent of teachers were female. In the 1990/91 academic year, this figure rose to 20 per cent, whereas in the 1991/92 academic year, the proportion of females among the entire body of Yemeni teaching staff amounted to 9.7 per cent.

57. This illustrates various negative factors. Over 70 per cent of teachers with secondary school qualifications are concentrated in the major towns as a result of population migration from rural areas. In addition, not all of them settle in the teaching profession after the prescribed five-year service,

as there are few financial incentives for doing so. The highest number of teachers, amounting to 46,450, is in basic education. Of these, 21 per cent are females who are to be found mostly in the major towns. No notable progress has been recorded, however, in the number of female teachers in rural areas.

58. The State is currently endeavouring to change the prevailing attitude towards employment-related female education by increasing the number of higher educational institutions in the various governorates. However, the disparity in educational opportunities between the sexes from the beginning has led to a disparity in opportunities to enter fields of administrative and vocational employment that are governed by social considerations relating to the status of women in general and civil-service employment in particular. Nevertheless, higher education and training - although limited - have helped women to enter many fields of civil-service employment and the increasing enrolment and graduation rates are expected to further promote the progress of education.

5. Educational principles versus the reality of the situation

59. The above information clearly indicates that child education in Yemen is facing various problems, including:

(i) The high illiteracy rate among the population (65 per cent, 87 per cent among females); illiteracy among girls at the compulsory school age of 6 to 15 years is 70 per cent;

(ii) The disparity in educational opportunities for boys and girls, since the proportion of girls who do not attend school amounts to 70 per cent of the total school-age population;

(iii) The disparity between the number of schools and teachers in rural and urban areas;

(iv) The disparity in enrolment rates in the general education stages compared with the size of the population. Enrolment rates after the sixth grade are noticeably lower;

(v) The decline in the ratio of teachers and school buildings to students;

(vi) The high truancy and drop-out rate among children, amounting to 65 per cent at the basic education stage.

60. The principles of education are unsupported by effective measures to help to promote child education. The above indicators reveal various difficulties which can be summarized as follows:

(a) The principle of free education

61. The principle of free education does not include all educational requirements. On the contrary, there are token fees which not all students are able to pay. Free education does not include subsidized access to educational items which school students need, such as clothing, pens and

paper. The principle of free education does not take into account the resources of families in the deteriorating economic situation which the country is experiencing.

(b) The principle of compulsory education

62. The principle of compulsory education has not been applied for various reasons, including:

(i) The inability of schools to absorb everyone of school age, particularly in rural and remote areas;

(ii) Social opposition to application of the principle of compulsory education, since families need child labour, particularly in rural areas;

(iii) The lack of equal educational opportunities for children who work to support themselves at other times.

(c) The principle of equal educational opportunities

63. Social distinction occurs in education between boys and girls, between rural and urban areas, and between the most and least privileged members of society:

(i) Statistics indicate that 70 per cent of girls do not attend school and that the enrolment rates for boys and girls are clearly different, namely 85 per cent for boys and 30 per cent for girls;

(ii) Statistics indicate that it is extremely difficult for rural inhabitants to attend schools because they are far away and built in inaccessible areas. Rural areas also lack resources, which are larger and more readily available in towns;

(iii) Some groups are opposed to school attendance, one example being the "Akhdam", who refuse to emerge from the abyss of poverty and who reject education for their children.

64. This situation in education confirms that more effective measures are needed in order to apply the principle of equal educational opportunities as a service for children that is provided by the State (see annexes I, II, V and VI).

## D. Information policies, programmes and activities

### 1. Media targeted at children

65. The different media undoubtedly have some influence on various aspects of young people's behaviour and are an important means to develop the culture and abilities of children, who constitute 41 per cent of the total population in Yemen. The media therefore have a duty to devote a reasonable amount of attention to this population group.

66. At this point, we can review the media output since the time of signature of the Convention on the Rights of the Child. The media in the Republic of Yemen consist of the press, radio and television.

The press

67. The children's press plays an extremely important role in developing and revealing various aspects of the child's personality by combining the provision of information with entertainment, taste and guidance. Some years ago, a number of children's newspapers and magazines were published. Some of these, however, have since ceased publication, including Al-Hudhud, Al-Bara'im, Wadhah, Nashwan, Osama, Yazin, Al-Yaman al-Sa'id, Nadir and Al-Tufula.

68. The children's press emerged belatedly in early 1981 at Sana'a and in 1983 at Aden in the form of the two magazines Al-Hudhud and Wadhah, neither of which survived in view of the obstacles that they encountered.

69. This failure to survive is attributable to lack of resources, the high cost of printed matter, poor printing and technical production facilities and the shortage of qualified editors and skilled staff, as well as the difficulty of distributing children's publications in remote and rural areas. These are the main reasons for the poor standard of children's publications and for the problems involved. In addition, the public press in the form of government and party magazines and newspapers show no interest in allocating column space to child-related subjects.

Children's radio programmes

70. There are several radio stations in the Republic of Yemen: the countrywide station at Sana'a, the second station at Aden and local radio stations at Hodeida, Ta'izz, Mukalla and elsewhere. Radio is the most widespread medium. However, there are obstacles impeding the development and improvement of children's programmes; all radio stations, for instance, limit their programmes to weekly serials, story programmes and special programmes on the occasion of national events and holidays.

71. The main reason for this lacklustre performance is no doubt attributable to lack of programme planning and the fact that there is no competent committee responsible for ensuring the success of children's programmes. Most children's programmes are the result of personal endeavour, since there is no research on children's programmes and no specialized advisory committee to help to develop such programmes and appoint their presenters.

72. Material difficulties are largely responsible for the continuation of this situation, since there is virtually no one available to provide training or retraining. This has precluded any independent and distinctive production of good radio programmes for children.

Television

73. Television is the most important medium and has attracted a large audience of children. Children's television programmes were first broadcast

when television began in the 1960s at Aden and the 1970s at Sana'a. Special sections and departments for children's programmes have been established, but the number of minutes allocated to the transmission of children's programmes on the first and second channels is limited to between 30 and 90 minutes a day divided among local, Arab and foreign programmes. Children's programmes are slotted in among local programmes, transmission material being divided into three equal sections as follows:

Foreign programmes in the form of cartoon films and stories with universal appeal;

Arab programmes in the form of serials, variety programmes and song programmes;

Local programmes.

Local programmes represent 33.3 per cent of the total output, with children's programmes representing 5 per cent.

74. Despite serious attempts to increase the number of children's programmes and develop their content, Yemeni television has not achieved the required standard in that field. An overview of the children's television programmes on both channels shows that they are virtually restricted to local programmes, the producers of which are inexperienced. Examples are "Tomorrow's Generation", "With Friends", "The Friends' Journey", "Festive Flowers", "A Journey in the Country", "Toddlers' Magazine", "Ramadan Competitions" and special programmes for national holidays and occasions.

75. The difficulties impeding the development of children's programmes can be summarized as follows:

(i) The lack of programme planning and the meagre budgetary allocation to children's programmes;

(ii) The lack of training courses, studios and equipment;

(iii) The small number of people with the enthusiasm to write, produce or present special programmes for children;

(iv) The dearth of local programmes compared to foreign and Arab programmes;

(v) The disparities between local and foreign production standards;

(vi) The fact that Yemeni television transmissions do not cover all regions of the Republic.

## 2. Cultural activities

76. The achievement of Yemeni unification ushered in a new and historic phase in the development of Yemeni society. Yemen has acceded to the Convention on the Rights of the Child and has taken steps to provide comprehensive child welfare.

77. The concern shown by the Ministry of Culture (Department of Children's Culture) is the outcome of previous efforts made in all cultural fields throughout the Republic of Yemen in a manner that reflects the letter and spirit of article 17 of the Convention on the Rights of the Child. In 1984, the Ministry of Culture and Tourism established the Department of Children's Culture through which numerous programmes, activities and exhibitions have been organized, as well as local, Arab and international meetings and international children's book fairs. Local, Arab and international painting exhibitions have also been held. However, the fact that there is outside participation from children in a number of competitions does not mean that all children benefit from cultural activities, since there are no special halls for children's exhibitions, which are held in the very few existing galleries for adult artists. The work of adults and children is exhibited together; adult artists' exhibitions are shown initially and young persons' exhibitions are allowed later.

78. Cultural activities began late for a variety of reasons which can be summarized as follows:

The lack of premises in which to pursue cultural activities and prepare children to acquire the skills which they need in order to be imaginative, creative and innovative;

The lack of the means needed for painting exhibitions, such as paintbrushes, coloured paints, paper and various materials which are too costly for children and families to buy;

The lack of attention paid to this kind of art in children's publications, posters, letters, books and so on;

The lack of attention paid to documenting such programmes in a special archive, even though most of these activities are covered by the various media.

79. The trends in the development of the artistic talents of children in our country illustrate a desire for Yemeni children to reach exemplary standards and enjoy the kind of personality conducive to the modernization, advancement and development of society. The lack of resources, however, prevents this from happening in all cases.

Literature

80. There has been considerable activity in Yemen since the 1970s. In 1979, the International Year of the Child, the State took steps to set up publishing houses in Yemen, for example Al-Hamdani printing and publishing house, the printing houses of the Ministry of Information and some private publishing companies.

81. During the 1980s, a number of children's newspapers and magazines were founded and children's stories were published, but the lack of authors, writers, illustrators, producers and designers specializing in children's publications, as well as the lack of technical staff such as printers and

specialists in the design and organization of modern printing and publishing houses, led to the closure of a number of magazines and newspapers and the suspension of publication of children's books.

The Children's Theatre

82. Dramatic activity began in Yemen in 1950 with theatrical performances in schools and children's plays on radio and television and on special occasions and holidays. The theatre played a role in children's culture but only modest resources were available until 1979, the International Year of the Child, when the Children's Theatre was opened at Aden and staged a number of theatrical performances for children. As a result, children's drama began to develop as an art form in Yemen, with foreign participation in some theatrical events.

83. Unfortunately, however, the Children's Theatre closed down and children's dramatic activity gradually dwindled for the following reasons:

(i) The lack of a children's theatre;

(ii) The lack of materials and equipment for staging theatrical events;

(iii) The lack of a budget and of plans and programmes for children's drama;

(iv) The lack of specialized personnel and appropriate scripts.

Children's festivals and artistic activities

84. Programmes of this kind are organized nationwide on a weekly or monthly basis and schoolchildren help to run the programmes during festivals and on occasions of national importance. It has become customary to open State programmes with children's activities and children's festivals are organized on the following occasions and holidays: the beginning of the academic year; 8 March, International Women's Day; 21 March, Mother's Day; 1 May, Labour Day; 1 June, Universal Children's Day; the two Revolution Days, 26 September and 14 October; the Feast of Breaking the Ramadan Fast (Id al-Fitr) and the Feast of Immolation (Id al-Adha); the signing of the Convention on the Rights of the Child.

85. In addition to the various activities organized by institutions, committees and organizations, children's songs and music have played a prominent role in these programmes. Some schools have begun to set up musical groups. However, there is a serious lack of material and equipment and the school day is short, especially in schools with three shifts, so that study periods devoted to the arts and music have been given over to other subjects.

Children's cinema

86. To date there is no special cinema for children but there are annual festivals of imported films containing new concepts and moral values for children. Such films are censored before being shown. However, Yemen itself lacks the equipment, trained staff and other resources needed to make children's documentaries and children's programmes.

## E. Social and mental welfare services for children

87. Given the importance of the family as the appropriate primary natural unit for the development of the child, in accordance with articles 26 and 27 of the Convention on the Rights of the Child, the State has taken steps to promulgate legislation and undertake activities such as the following:

### 1. Social Security Act No. 1

88. Under this Act, needy families receive monthly financial support and some support in kind. A total of 39,000 families have received such support, which amounts to 153 million Yemeni rials annually for the country as a whole. Its purpose is to help improve the living conditions of the families concerned so that they can rear and educate their children. They continue to benefit until their children find employment, are in a position to support themselves or complete higher studies.

89. However, if we compare the number of families benefiting from the scheme with the number of poor and destitute families, we find that the problem persists and that the material assistance provided is very modest in the light of low family income levels and other economic problems.

### 2. The productive family scheme

90. This scheme was launched as an alternative to social welfare benefits. Its purpose was to provide training for beneficiaries that would give them rapid access to appropriate employment and to provide opportunities to assist as many poor families as possible. The scheme began with the establishment of four centres offering the requisite facilities but, following unification, the Government found it necessary to open additional centres in other governorates to accommodate more trainees. However, its resources were inadequate for the purpose, particularly since each of the centres needed appropriate equipment and a crèche for working mothers.

91. To achieve its aims, this scheme requires greater support to make its resources sufficient to improve its services to families and children. In addition, schemes of this kind need to be studied by social researchers to ensure that they provide services to the really needy and to persons with no fixed income so that they can educate their children in the same way as other social groups.

### 3. Social services for children

92. Alongside family care, children are provided with compulsory basic education services from the age of six and should, in principle, have access at an earlier age to crèche and kindergarten facilities to prepare them for the first stage of compulsory basic education. Such crèches and kindergartens exist only in the larger towns, while rural areas have only basic education facilities. A total of 64 crèches and kindergartens now operate in the larger towns. There is a serious shortage of social services to ensure proper childrearing, and working mothers suffer great hardship in attempting to hold down a job while ensuring that their children are in safe hands during their

absence. Preschool children therefore lack appropriate social welfare establishments to look after them. Children under the age of six often spend their time in the streets where they are accident-prone, the more so if their mother is at work.

### 4. Social services for disabled children

93. Steps have recently been taken to provide social services and training for the disabled to assist them in developing their abilities, to prepare them for productive employment and to help them to integrate into society. Homes and centres providing services, social welfare, education and training have been established for children with motor, mental and visual handicaps, and recreational activities are organized on their behalf. However, in view of the large number of beneficiaries and the paucity of resources available in relation to the scale of the services required, the personnel employed in this branch obviously lack the expertise required for this kind of work and need training, continuous professional development and more material incentives to remain in their jobs. There is also a shortage of facilities for treating different kinds of disabilities. The number of such establishments is shown in annex VIII.

94. Mention may be made of two social welfare projects for the disabled: the early home education project and the CBR project.

Both projects provide home, social and training services for disabled children and their families. A total of 278 children benefited in the initial years (1992-1993).

95. The projects cover only a small proportion of governorates. Although they provide model services, their scope is limited in comparison to the number of disabled children without access to special centres and establishments. The network will have to be extended to the remaining governorates in order to reach all disabled children in the Republic of Yemen, especially in the wake of the recent events, which left many people disabled.

### 5. Provision of care and training for homeless and delinquent juveniles

96. Since the mid-1970s, five centres in the Republic of Yemen have been providing social, psychological, educational and vocational rehabilitation services for juveniles in these categories who have lost their natural link to the family and have become homeless and open to exploitation. However, the centres fail to play their proper role because of the shortage of resources and the lack of comprehensive services. There has been an attempt in the last two years to proceed with the promulgation of the Juvenile Welfare Act, to formulate its implementing regulations and to prepare for the establishment of juvenile courts. However, the social and economic situation prevailing after the Gulf war impeded such action and the existing centres, with their current capacity, are unable to provide adequate services for needy children. Moreover, the recent events have led to an increase in the number of homeless and delinquent juveniles.

### 6. Orphanages

97. Orphanages provide welfare services (food, clothing and accommodation), as well as social and educational services for orphans. There is an establishment of this kind at Sana'a and there were also social and educational establishments for orphans in the southern governorates, known as nomad schools, which provided services for orphans and the children of nomads in areas inhabited by the Bedouin. They operated like mobile schools, catering to the needs of the Bedouin community, providing services and protecting children from neglect and vagrancy. They also imparted social, educational, recreational, artistic and cultural skills and helped children to become self-reliant and to play a useful role in society. However, these schools have ceased to operate because they were unable to cover their costs and they lacked the necessary financial and material resources.

### 7. Mental welfare services

98. It is important, before reviewing the Government's action in this field, to consider the extent to which such matters have been addressed and their relationship to other issues of relevance to children and the degree of development of society.

99. It may be concluded from a first reading of the Convention on the Rights of the Child that, with reference to the articles dealing with mental and spiritual dimensions, appropriate conditions for children have not been provided because of a large number of economic and social circumstances. Some services are, however, provided, such as:

(i) Mental health services for children are provided by some establishments, albeit on a limited scale because the establishments are a recent development in Yemeni society and lack the resources required for such services in the broad sense of the term;

(ii) The existing legislation and regulations guarantee respect for the right of parents and the family, as those responsible for the welfare of their children, and protect children from physical and mental abuse (see the amendments to the Constitution, the Juveniles Act, the Personal Status Act, the Judicial Proceedings Act, the Prisons Act, etc.). At the same time, when children are forced into delinquency, vagrancy and begging, the competent bodies take no action to prevent such abuse because of the lack of social workers;

(iii) Services are provided by social establishments for disabled, delinquent, homeless, mendicant and other children in the form of training, rehabilitation and social integration, but these services cannot keep pace with the increase in such groups and do not respond adequately to the existing social demand;

(iv) Private hospitals provide ongoing mental and psychological health care for children but their services are very costly.

100. On account of the economic and political circumstances described in the introduction to the report, we feel that the standard of services and activities requires further development and support. Material and technical resources are needed to undertake a large number of projects or to take action against certain widespread phenomena in our own and similar societies, such as poverty, low family income, etc., which have an impact on the low standard of mental care for children.

Evaluation of social services in 1992-1993

101. The State is endeavouring to maintain existing services, albeit at a minimum level and with local and external support, in the form of a number of projects implemented under the circumstances imposed by the Gulf war, such as:

(i) Establishment of the Yemeni Higher Council for Children and the Children's Fund and the holding of a number of meetings on development and population;

(ii) A preliminary study of the phenomenon of child beggars at Sana'a in cooperation with the Swedish child welfare organization.

102. By way of evaluation, we may say that a complete overhaul of existing social services is necessary. A new social policy in tune with the new political, economic and social situation is also necessary to deal with the current tragic circumstances. According to the findings of the 1993 study of child beggars at Sana'a, the capital city, family disintegration as a result of polygamy, death or divorce plays a major role in compelling many people, including children, to resort to begging. It also showed that 30 per cent of mendicant children were from families in which there were several wives. Sixty per cent of children lived either with their mother (and hence their mother's husband) or with their father (and hence their father's wife), that is to say in an unnatural family situation. A disturbed and fraught family environment has an adverse impact on children's psychological make-up and drives them to vagrancy and begging, which in turn prevents them from attending school so that they are deprived of education and a secure future.

103. Eighty-seven per cent of respondents said that they received no assistance from the State and 77 per cent received no assistance from benevolent associations either. About 75 per cent of children would give up begging if the State provided an acceptable alternative, that is to say decent accommodation and a subsistence income. The children's desire to cease begging shows that it is forced upon them either by their relatives or by difficult economic circumstances, their only concern being to keep body and soul together in the absence of social security legislation that would offer protection, employment opportunities and the chance to live a decent life.

104. In spite of the existence of numerous social bodies and some legislation guaranteeing children's rights, the deterioration of these services and the failure to expand and develop them in line with population growth prove beyond a doubt that children in our country live in distressing circumstances. This has been particularly true since the recent war, which had a destructive

impact on the economic and social infrastructure in general and also led to the destruction of children's educational, social and recreational institutions.

105. Child-welfare establishments - crèches, kindergartens, orphanages, homes for juveniles, and centres and homes for the disabled - must, in the first place, be built according to modern scientific specifications. In addition, they lack proper furnishings and equipment for the pursuit of the kind of social, educational, vocational and recreational activities that children need in order to develop on an equal footing with their peers. Moreover, girls tend to be neglected in many programmes. The establishments in question also lack trained specialists (social scientists, psychologists, health specialists and vocational trainers) and the few who are available lack the materials and resources they need to do their work properly.

106. It should be noted that these basic services reach only about 2 per cent of those in need because of limited resources and because they are restricted to the main cities of the principal governorates. There are no social services to speak of in the remote governorates. Under these circumstances, mass organizations, parties and regional and international organizations and bodies must support existing establishments by meeting their needs, particularly in respect of children, in the areas laid waste by war, since the governorates in question are still deprived of social services and the war has disrupted many aspects of daily life in Yemen.

107. Greater coordination of action by the State and by private and benevolent organizations calls for the following measures:

Ensuring that rural areas effectively enjoy their right to health, educational and housing services and all infrastructural facilities, including roads;

Building of small residential complexes in selected areas carefully distributed among the country's rural or peripheral urban areas; the dwellings would be sold to the needy, particularly beggars, at reasonable prices payable in easy instalments;

Establishment of factories and workshops for women (carpet-making, manufacturing of household utensils and spare parts for factories), particularly women with children to support;

Construction of vocational schools (free and compulsory boarding schools) for orphans, vagrant children and physically and mentally disabled children, where they can acquire an education and occupational skills;

Involvement of regional and international organizations in building health, social and educational centres with a view to:

Promulgating a social security act to ensure social and economic protection for the unemployed, including women, pregnant women and nursing mothers;

Speeding up the establishment of courts for male and female juvenile offenders and initiating the transfer of those already in prison to juvenile welfare establishments in accordance with the provisions of the 1992 Juveniles Act;

Reviewing the Social Assistance Act, in particular the articles concerning the scale of financial assistance, in order to bring them into line with the current economic situation.

## F. Health

108. Child health is the key to a society's future well-being. Every child should have the opportunity to grow up in a healthy environment, given the fact that 90 per cent of human physical and mental growth occurs in early childhood. Hence the need to protect children's health. The Yemeni Government is fully aware of the importance of ensuring such protection through programmes designed to reduce infant and child mortality by the year 2000, in accordance with the provisions of article 24 of the Convention, based on the idea of primary health care.

### The general health situation

109. Children under one year old constitute 4.5 per cent of the population of Yemen, children under five 22 per cent and children under fifteen 54 per cent. Women of childbearing age (15-44) constitute 25.2 per cent of the population. Hence the prime importance of the mother and child welfare programme, which targets three quarters of the population of Yemen.

110. It is a well-known fact that child health is closely bound up with the health of society, which is influenced by social, economic, environmental and other factors. Yemen has made considerable progress in the past 20 years despite the problems impeding its development. As a result of its development programme, the infant mortality rate declined, albeit slowly, from 171 per thousand live births in 1985 to 130 in 1990. The mortality rate for children under five declined from 390 per thousand live births in 1960 to about 192 in 1990. But these rates are still too high and a greater effort is needed to reach the target rate of under 70 per thousand live births by the year 2000, which was set in the Health for All strategy and also in the 1992 national population strategy.

### Principal health and social indicators

111. The principal health and social indicators are as follows:

Crude death rate: 21.8 per thousand;

Crude birth rate: 52.6 per thousand;

Population growth rate: 3.1 per cent;

Overall fertility rate: 8.2 children;

Life expectancy at birth: 46 years;

Primary health care coverage ratio: 45 per cent (68 per cent in urban areas; 32 per cent in rural areas);

Percentage of the population with access to clean drinking-water: 52 per cent (88 per cent in urban areas; 12 per cent in rural areas);

Coverage ratio of health expenditure: 51 per cent (70 per cent in urban areas; 30 per cent in rural areas);

Illiteracy rate: 60.6 per cent (46 per cent for males; 85 per cent for females);

Urbanization rate: 21 per cent;

Average number of inhabitants per doctor: 4,346;

Average number of inhabitants per nurse: 1,818;

Average number of inhabitants per hospital bed: 1,142.

112. These indicators show a low rate of urbanization, widespread illiteracy, a high fertility rate and a low standard of living. The health indicators are among the lowest in the world. The figures also show a concentration of services in urban areas, while rural areas, especially remote regions and those difficult of access, are still deprived of health services. It may therefore be concluded that health standards are low in the country as a whole and among children in particular.

113. The following overview of the health situation is provided in response to article 24 of the Convention, which deals with child health.

Major child health problems

114. The major causes of child mortality in Yemen, as set forth in the paper on health programme priorities in the 1990s, are:

(i) Diarrhoea and malnutrition: 29 per cent of child deaths;

(ii) The six childhood diseases: 12 per cent of infant deaths;

(iii) Premature (underweight) births, with an infant weight of up to 2,500 grammes; the ratio of premature births is estimated at 30 per cent and is responsible for 15 to 20 per cent of deaths;

(iv) Acute infection of the respiratory system: 15 per cent of child deaths;

(v) Malaria: this disease is considered endemic in Yemen and causes 17 per cent of child deaths;

(vi) Accidental death: road accidents, gunfire, children hit by cars, fire accidents, poisoning, falls from high places; according to the 1991 demographic survey, about 7 per 1,000 children under the age of five are involved in accidents, with fire accidents accounting for 30 per cent of the total;

(vii) Bilharzia: this disease is widespread in rural areas and mountain governorates, where its incidence amounts to 60 per cent.

115. Large numbers of Yemeni children thus continue to die of contagious and infectious diseases and malnutrition, diseases that can be treated only by means of preventive services that ensure child safety through immunization, treatment of dehydration due to diarrhoea, monitoring of child growth and promotion of breast-feeding, all of which are strategic services aimed at ensuring child survival.

116. Our country launched a widespread immunization programme in 1977 to protect children against the six diseases for which vaccines are available (tetanus, measles, poliomyelitis, diphtheria, whooping cough, tuberculosis). This centralized horizontal programme was undertaken with the assistance of the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) and included a social mobilization campaign in the media. Mobile teams were sent to stimulate public awareness in rural areas. A tetanus inoculation and vaccination campaign for adult women was also conducted. The campaign covered 80 per cent of children under the age of five and 74 per cent in the case of measles in 1990. However, the suspension of support for the immunization programme following the economic crisis in our country led to a decline in the coverage ratio. According to a study undertaken in late 1993, the coverage ratio of the immunization campaign against the six diseases had declined to 42 per cent for children under the age of five and the vaccination ratio for women of childbearing age (double dosage) had dropped to 23 per cent.

117. Important objectives set by the Ministry of Health in its strategy for the period 1992-2000 included a child immunization rate of 90 per cent and eradication of poliomyelitis and infant tetanus. These targets formed part of its interim oral rehydration plans for the prevention of dehydration.

118. In the past 10 years, the acceptance of oral rehydration treatment for the prevention of dehydration due to diarrhoea, the main cause of infant mortality in Yemen, has increased. Health workers and specialists have been trained in its use and a media campaign has been conducted to stimulate awareness among families and mothers. The mother and child demographic survey carried out in 1991 showed that 57 per cent of women knew about this treatment and 92 per cent of them knew of sources from which it was available but only 55 per cent of mothers used it when their children fell ill with diarrhoea. As a result, it is one of the most widespread of children's diseases, representing 34 per cent of diseases contracted by children under the age of five. However, its incidence can be reduced only by taking action in other areas such as ensuring a clean supply of drinking-water, hygienic disposal of waste and effluent, and environmental rehabilitation. There is a serious lack of such facilities in our country. For example, garbage collection facilities exist in only six of the main towns and a large

proportion of the population still suffer from health problems related to environmental degradation. Coordinated action is required to draft and introduce legislation designed to address environmental problems and promote awareness with a view to protecting the environment and keeping it healthy.

119. In late 1993, the State launched a national anti-diarrhoea and health awareness campaign and began to implement environmental rehabilitation projects and to encourage breast-feeding, child growth monitoring and health care for mothers in the following ways.

(a) Breast-feeding

120. Studies in Yemen have shown that breast-feeding still predominates but that artificial feeding has begun to spread in urban and rural areas. The last demographic survey conducted in 1991 showed that 73 per cent of mothers had begun to feed their children artificially during the first three months of their lives and 10 per cent of nursing women weaned their babies at that age. The average duration of breast-feeding in Yemen was found to be 16.8 months.

121. In the early 1980s, the Ministry of Health, in cooperation with international organizations, took the following action to encourage and promote breast-feeding:

(a) Action to end international assistance for the marketing of milk substitutes, but this has not been ratified to date;

(b) A wide-ranging media and poster campaign to promote breast-feeding;

(c) A ban on the distribution of free samples of artificial milk in hospitals throughout the country;

(d) At the beginning of the 1990s, a child-friendly hospital initiative was launched and is currently being implemented in the Model Hospital of the Revolution in the capital as a pilot strategy for the encouragement and support of breast-feeding to be extended gradually to all hospitals in the country.

(b) Monitoring of child growth

122. The monitoring of growth is one of the most difficult components of the health strategy for child survival. Effective use of the health card "The Road to Health" is still far from satisfactory in many mother and child health care centres, although health workers have been trained to use it. Because of certain habits and illiteracy, mothers are unaware of the purpose of the card. Moreover, failure to supply them consistently in all health centres and a number of other factors have led to symptoms of malnutrition or undernutrition. Mothers need to make a special effort to provide additional nourishment for their children and to supervise their children's state of nutrition. It should be noted that in most cases malnutrition has less to do with the supply of food than with repeated illness and lack of information concerning proper nourishment for children. Some bad habits in Yemeni society, such as failing to supplement mother's milk with other food or depriving children with diarrhoea of food and drink, are conducive to

malnutrition. The 1991 statistics showed that 53 per cent of children under the age of five were underweight and 15 per cent of children under the age of two were emaciated.

(c) Maternity care

123. Maternity care has been given insufficient attention in our country. Statistics on maternal disease and mortality are poor. It is not surprising, therefore, that the maternal mortality rate, estimated at 800 to 1,000 per 100,000 live births, is one of the highest in the world. Maternal mortality accounts for about one third of deaths among women of childbearing age. The perinatal mortality rate (death of the embryo during the eighth to the twentieth week or later in pregnancy, and death of live infants within the first week of life) is also very high: 26 to 74 for every thousand live births according to studies undertaken in hospitals and in society in general. These ratios reflect the poor state of maternal health in Yemen.

124. It has been established beyond doubt through global studies that there is a strong relationship between maternal and child mortality. According to the 1993 study of significant factors in maternal mortality, 60 per cent of live-born children under the age of five fail to survive when their mother dies during or after birth, compared with 38 per cent of children in cases where the mother is still living. The study, which was carried out in the country's northern and eastern governorates, also brought to light the following causes of maternal mortality:

Hepatitis;

Haemorrhage;

Extrauterine conception;

Septicaemia;

Difficult delivery.

125. The following are a selection of indicators from the 1991 mother and child demographic survey:

(a) Fertility rate: 7.4 children per woman;

(b) Twenty-four per cent of women under the age of 20 were married, 2.6 per cent of women aged 15 had begun to bear children and 11 per cent of women under 20 had borne at least one child. Seventy-six per cent of women had no antenatal care and the average number of visits to antenatal centres was three. The main reason for this low coverage was lack of awareness of the importance of antenatal care in society and the prevailing belief that care was intended only for those who were ill during pregnancy. Other reasons for failure to use such services were the low standard of care, the shortage of trained staff, the distance of maternity care centres and the small number of such centres;

(c) Fifteen per cent of women had been vaccinated against tetanus, 10 per cent with two or more doses and 5 per cent with only one dose;

(d) The mortality risk is greater for mothers who give birth at an early or late age (under 20 or over 39) or in quick succession (less than two years between births), as shown in the following tables:

Table 1

Mortality risk related to childbirth, by age group

| Age at delivery | Infant deaths | Deaths of children in the 1 to 4 age group | Deaths of children under the age of 5 |
|---|---|---|---|
| Under 20 | 130 | 32 | 158 |
| 20-29 | 96 | 39 | 131 |
| 30-39 | 92 | 45 | 133 |
| 40-49 | 133 | 91 | 193 |

Table 2

The interval between births

| Interval between births | Infant deaths | Deaths of children in the 1 to 4 age group | Deaths in children under the age of 5 |
|---|---|---|---|
| Less than 2 years | 135 | 55 | 182 |
| 2-3 years | 52 | 26 | 76 |

126. All these indicators provide clear evidence of the poor standard of maternity care, bearing in mind that careful family planning and health care during pregnancy and childbirth play an important role in reducing high child and maternal mortality rates alike. According to Ministry of Health statistics for 1989, complications of pregnancy and childbirth occurred in 19.6 per cent of cases, 12 per cent of deliveries took place in health centres and 16 per cent were supervised by trained personnel. Contraceptives were used by 7 per cent of those surveyed.

127. In the early 1990s, the Government began to give increased attention to mother and child care in an endeavour to implement the mother and child strategy, which aims at halving the maternal mortality rate by the year 2000 through the quantitative and qualitative improvement of maternity services, by educating mothers to avoid traditional methods that are harmful to children, and by helping them to attend to their child's nutrition, thereby protecting both themselves and their child against risk.

## II. PROBLEMS AND DIFFICULTIES IMPEDING THE PROVISION OF CHILD WELFARE SERVICES

128. It may be useful to outline the background to the problems involved in implementing the Convention on the Rights of the Child. War and the economic and political situation in the Republic of Yemen may certainly be counted among the challenges and difficulties that have prevented the speedy provision of child welfare services and the fulfilment of their requirements. During the period under review, particularly in the 1970s, the State focused on the establishment of the infrastructure and the basic facilities needed for the provision of these services. However, the suffering continued and a succession of crises and conflicts had an adverse impact on the economic situation, keeping living standards at a low level and affecting the situation of children.

129. However, this does not mean that the right of children in our country to proper care and attention has not received official recognition. The Government has taken a variety of steps in the field of legislation and social, health and educational policy with a view to identifying and meeting existing needs, so that Yemeni children now enjoy certain rights under domestic legislation. These requirements must be met as a matter of urgency in order to develop children's intellectual and mental capacities and aptitudes, enhance their social skills, diversify their sources of culture and knowledge, and consolidate their civil and legal rights with a view to promoting the development of their personality, preparing them for the responsibilities of life and shaping their future.

130. The main difficulties may be summarized as follows:

(a) The lack of a high-level technical body responsible for children's affairs. Although the State has attempted in recent years to set up a Yemeni child welfare board, the project still lacks the requisite specialized personnel capable of promoting child welfare services.

(b) The activities conducted in bodies attached to government ministries lack a forward-looking approach to child welfare mechanisms and programmes and have therefore failed to achieve their aims.

(c) Increasing population growth, which has been overwhelmingly concentrated in rural and mountainous areas. Children account for a large proportion of these communities and are deprived of many health, social, educational, cultural and recreational services. Many child welfare projects fail to take account of these requirements in an integrated and comprehensive way so as to meet the needs of children in the regions concerned. Owing to lack of systematic and carefully planned coordination between child welfare mechanisms and programmes, the action taken usually fails to produce the desired results because of the large number of governmental bodies and institutions responsible for children's affairs and the vagueness of the aims, strategies and future orientations of policies aimed at promoting such services.

(d) Lack of government support for the expansion of child welfare services so that existing services often run into difficulties because the relevant policy-making machinery and programmes are also deprived of support. Other problems in this area may be summarized as follows:

(i) The limited capacity of the bodies that formulate general child welfare strategies;

(ii) The lack of technical and administrative experience of persons working on behalf of children and in child welfare establishments, a shortcoming that adversely affects the implementation of short- and long-term plans and programmes;

(iii) The vagueness of the future aims and strategies of relevant government bodies, which undermines the utility and effectiveness of child welfare programmes.

(e) Some existing child welfare plans and programmes are meaningless because they do not fully grasp the real nature of children's present and future needs.

(f) The lack of detailed information and statistics on existing health, educational, cultural and social services for children that would shed light on the prevailing situation, the type of improvements needed and the scale of the increase required in services provided by child welfare establishments in order to establish quantitative targets that can be measured and evaluated.

(g) The lack of social and field studies to identify children's needs, to help provide the requisite factual basis for the preparation of future projects and budgets for child welfare programmes and to serve as a performance indicator for the implementation of programmes and ideas for future plans.

(h) The lack of child welfare training establishments, which means that child welfare establishments are unable to meet their needs for a wide range of professionals with diverse qualifications, scientific expertise and practical experience in the field. This type of expertise calls for pre-service and in-service training designed to improve standards of performance.

(i) The rising cost of and growing demand for social, educational, health, cultural and recreational services, which have created difficulties for existing establishments and may compel them to suspend the provision of such services and the formulation and implementation of child development and welfare goals and policies designed to prepare children to lead a decent life, the kind of life that enhances their capacity to assume the responsibilities required of them in the future.

(j) The lack of a regular and systematic evaluation of progress in implementing the Convention at the national level, that is to say a permanent and systematic review of programmes and projects relating to the Convention from the standpoint of sectoral planning of child welfare programmes or assessment of their applicability.

(k) The lack of urgently needed planning by the administration of child welfare establishments with a view to establishing programming and planning priorities, given the fact that planning is a basic input to be used by the establishments concerned in addressing humanitarian problems.

(l) Most child welfare establishments are located in urban areas and many rural areas have no access to their services because the formulators of development policy have no concept of the needs arising from the immense suffering of children in those areas. In addition, the economic situation of families in urban and rural areas prevents them from taking advantage of the services offered by child welfare establishments, especially those for which a fee is charged.

(m) The non-existence of social welfare establishments catering for disabled and juvenile girls so that their access to such services is very limited compared with boys and is non-existent in some areas.

(n) Institutional child welfare services are few and limited in scope. They fail to meet children's basic and growing needs in a variety of areas.

131. In spite of the large number of public establishments and agencies dealing with children's affairs and child welfare and protection, there is scarcely any proper coordination among them, a fact that reduces the effectiveness of their role and the potential offered by the number and variety of their activities.

132. All of these shortcomings have an adverse impact on the provision of services by child welfare establishments, and this impact is compounded in the case of care and rehabilitation establishments for the disabled, who are deprived of proper care because of the lack of human resources and specialists capable of running such establishments.

133. Moreover, many privileges and legal provisions that would improve the lot of disabled children have not been implemented because of the lack of clear-cut and integrated national strategies dealing with care and rehabilitation for the disabled.

134. The role of child welfare services and social workers in existing social, educational and health establishments is still limited in terms of the relationship between the child and the social worker, especially in orphanages, homes for juveniles or the disabled, and preschool educational establishments. It is also a well-known fact that children with special development problems do not receive the necessary care and support because the services that social workers should be providing in the context of educational, social, health or recreational establishments such as clubs, psychiatric clinics, crèches, kindergartens, schools and centres for the disabled are limited and cannot be used to benefit children. As social workers do not play their proper role in these establishments, they cannot easily tell the difference between individual children's circumstances and needs, or how they would respond to the social worker or to the help that they require. In addition, social workers are greatly lacking in expertise and in

the theoretical and practical skills needed to deal with children in these establishments because of a lack of in-service training, all of which impedes the implementation in Yemen of the articles of the Convention.

135. These problems will continue to exist until such time as the relevant government bodies address the problems and take practical steps to meet these essential and growing needs under scheduled plans backed up by annual budgets, thereby improving the situation in different areas. In pursuit of that aim, section III of this report sets out a number of proposed plans in support of the implementation of the Convention on the Rights of the Child in the Republic of Yemen.

## III. PROPOSED PLANS OF ACTION

### A. Plan of action for the establishment of a home for socially-handicapped juvenile girls

The problem

136. Field studies have drawn attention to the existence of a group of juvenile girls who commit offences and are currently exposed to abuse, oppression and exploitation when they find themselves in prison with adult women. After spending some time in these conditions, they tend to become professional delinquents because of the lack of a social rehabilitation policy in the penal establishments concerned. It is therefore essential to establish a special home for girls in response to the rapid social change that has affected family and other social institutions. These institutions have been unable to cope with existing problems in the absence of specialized social and rehabilitation centres such as homes for juveniles which can play the family's role in such circumstances.

Aims

137. The proposed plan of action would have the following aims:

(a) To establish a special institution for the rehabilitation and reform of juveniles;

(b) To foster an appropriate natural environment to reconstitute the personality of juvenile girls and prepare them for release from the home;

(c) To remove anything that might remind the juvenile girl that she is undergoing punishment;

(d) To foster an appropriate educational and cultural atmosphere, with guidance and counselling, to promote readjustment of the juvenile and her integration into society;

(e) To develop the juvenile girl's social awareness so that she can reintegrate easily after her release from the home;

(f) To use programmes comprising social and cultural activities and sport to strengthen the juvenile girl's moral fibre, reform her character and teach her to cultivate a range of virtues;

(g) To provide religious and cultural instruction geared to the girl's age, state of mind and social condition.

Justification

138. Rapid population growth and the growing demands and everyday needs of the family and society in response to social change and changes in habits, customs and traditions have produced signs of moral degeneracy among juvenile girls in some poor, needy and neglected environments as a result of family and social pressures that have undermined family structures in a number of ways.

139. Juvenile girls are currently held in women's prisons alongside hardened women criminals. This situation undermines any preventive reform programme for juvenile girls and there is no clear-cut policy to establish a juvenile institution for girls where their behaviour can be changed and their previous attitude towards themselves and others revised.

140. An institution of this kind, providing educational, social, sports and vocational programmes, should offer many opportunities for productive initiatives. The staff would be aware of any inclination to change on the part of the juvenile girls in the context of therapeutic programmes involving counselling, encouragement, empathy and sympathy in the event of failure. They would also endeavour to enhance the girls' self-esteem through rehabilitation, training and instruction, in contrast to the current situation in the prisons where juvenile girls are detained. Essential therapy would be provided involving the entire staff of the institution through the establishment of social relationships between them and the juveniles by means of various kinds of activities.

141. In order to establish the institution the following measures would require to be implemented:

Means

(a) Provision of a plot of land for the project;

(b) Design of a building suited to the rehabilitation, training, educational and recreational programmes;

(c) Equipment and furnishing of the building with educational and teaching aids in accordance with modern specifications;

(d) Installation of productive workshop facilities for rehabilitation, vocational training and programmes of literary, cultural, recreational and social activities;

(e) Appointment of the requisite administrative and technical staff for the institution and provision of the corresponding materials and equipment.

Funding

(a) Earmarking of the financial credits and appropriations required to implement the project under the 1996-1997 investment programme budget of the Ministry of Social Security and Labour.

(b) Steps to open up channels of communication with international organizations that might help to fund the project.

(c) The budget: government contribution:

Forty million Yemeni rials (building costs);

Salaries of the staff of the institution;

(d) Foreign support:

Coordination with the Embassy of the Netherlands, UNICEF, the Swedish International Development Agency (SIDA), the United Nations Educational, Cultural and Scientific Organization (UNESCO) and the International Labour Organization (ILO) with a view to obtaining financial assistance to furnish the home and install the requisite facilities for teaching, workshops and programmes of social and cultural activities.

UNICEF: US$ 100,000;

SIDA: US$ 50,000;

UNESCO: US$ 60,000;

ILO: US$ 150,000.

B. Plan of action for the establishment of a training centre for the staff of preschool educational establishments (crèches and kindergartens)

The problem

142. The problem underlying the proposal to establish a training centre for the staff of preschool educational establishments (crèches and kindergartens) is the lack of instructors, teachers and administrators with specialized training in child welfare, who should possess a number of academic, personal and professional characteristics to qualify for this kind of responsibility.

Aims

143. The aims under the plan of action are:

(a) To create a body of Yemeni professionals capable of assuming responsibility for teaching preschool children and of transmitting their knowledge and expertise to other professionals;

(b) To create new employment opportunities for women in this vital area;

(c) To create local training opportunities;

(d) To seek to attach the centre to model kindergartens and crèches that would provide facilities for practical training;

(e) To involve the centre in supervision and monitoring of existing crèches and kindergartens and those established in the future.

Justification

144. A field study of public and private crèches and kindergartens carried out in recent years brought to light a number of shortcomings in the human resources employed in such establishments, particularly private crèches and kindergartens whose teaching staff had not been properly trained and used inappropriate teaching methods. These projects require additional support through the establishment of a training centre for kindergarten teachers and instructors for the following reasons.

145. The tendency for women to seek employment has created an urgent need for the establishment of kindergartens and crèches, and this has in turn created a demand for qualified teachers trained in the methods to be used in such establishments.

146. The changes that have occurred in society in response to economic, social, political and technological change and changes in social mores have created a demand for teachers with a high level of theoretical knowledge and varied experience to meet children's wide-ranging and specific development needs with their spiritual, social and cognitive dimensions.

147. A large proportion of teachers in private kindergartens are not properly qualified and need to enrol in a training centre of this kind so as to play their role as teachers and educators as effectively as possible.

148. This type of project has an important educational dimension in so far as it creates new employment opportunities in a vital area. In addition, the centre will supervise the implementation of the programmes and activities offered by public and private kindergartens and crèches, so that women can enter the labour market with an easy mind in the knowledge that their role is being played by a trained teacher whose skills are being used for the benefit of their children.

149. The plan of action calls for the implementation of the following measures:

(a) Provision of land for the project;

(b) Provision of the requisite human and material resources, the basic ingredients needed to ensure the success of the project;

(c) Design of a building to house the centre or, failing that, rental of an appropriate building for the purpose;

(d) Preparation of an outline curriculum and theoretical and practical syllabus to form the basis of the centre's work;

(e) Steps to establish a model kindergarten and crèche concurrently with the establishment of the centre to provide an opportunity for practical and theoretical training;

(f) Coordination between the Ministry of Education, Sana'a University and the Ministry of Social Security and Labour to obtain approval for the adoption of the project;

(g) Earmarking of the financial credits and appropriations required to implement the project;

(h) Opening up of channels of communication with a number of international organizations operating in this field.

Budget

150. The Ministry of Social Security and Labour and the Ministry of Education will assist in establishing the training centre by incorporating a separate budget for the project in their 1995-1996 budget. The sum involved is estimated at 4 million Yemeni rials. Provision for payment of the salaries of the staff recruited to work in the centre will come under the annual budget of the Ministries.

151. Foreign support will be used to provide equipment for the centre, to supply it with the furniture, materials and resources required for the training process and to equip the crèches and kindergartens with the requisite furniture and playthings:

UNICEF: US$ 500,000;

UNESCO: US$ 500,000;

SIDA: US$ 500,000.

### C. Plan of action for the establishment of children's villages in the Republic of Yemen

The problem

152. Notwithstanding its social and economic progress, our country still lacks certain facilities, especially social services such as care for paraplegics and persons suffering from multiple disabilities, a system of foster families and other services of the kind provided by SOS-Kinderdorf International (SOS Children's Villages) in a number of countries, including Arab countries, whose practical experience in this field has proved successful in terms of its beneficial and effective role in caring for the groups concerned.

Justification

153. There is an urgent need for a project of the kind provided by SOS Kinderdorf International, which has supported a number of children's village projects throughout the world. This need stems from the changes that have occurred in many of the values, concepts and standards underlying social behaviour and from the emergence of certain social problems, as a result of which many orphans, children of unknown parentage and others have been exposed to the risk of corruption and exploitation, especially under the difficult circumstances obtaining in our country during the war.

154. Owing to the prevailing economic and social situation, many people who would previously have been willing to adopt orphans and children of unknown parentage are now unable to incur the expense and responsibility of rearing and educating them. As a result, the children in question are deprived of a natural family environment that would offer them security and protection. The establishment of this kind of institution as an alternative care system is necessary to extend the scope of services available to groups of deprived and homeless children.

Aims

155. The aims in establishing such an institution are:

(a) To create a substitute family environment with social, psychological and health care for children who have been prevented for one reason or another from growing up in their natural family;

(b) To monitor children's upbringing in foster families;

(c) To formulate and implement cultural and health awareness programmes for foster families through lectures and training for foster mothers;

(d) To entertain the children on various occasions by means of excursions and other programmes of family and social activities.

Means

156. The children's villages will require the provision of the following:

A plot of land large enough for 20 small houses, each consisting of 4 rooms, a bathroom, a kitchen and a small courtyard and measuring not more than 150 $m^2$;

A house for the village director measuring not more than 150 $m^2$;

A house for the administration measuring not more than 150 $m^2$;

An administrative building measuring not more than 20 $m^2$ to provide assistance for mothers and accommodate guests;

A kindergarten measuring not more than 20 $m^2$;

Equipment of the buildings and administrative centre with the requisite furniture and office supplies;

Recruitment of a staff of five foster mothers to work on a permanent basis in the children's villages in return for a monthly salary. The house in which they work would serve as their permanent residence.

Measures

157. The following measures will require to be undertaken:

Monitoring of the acquisition of a plot of land on which to build;

Recruitment of foster mothers on the basis of detailed job descriptions;

Contacts and coordination with SOS Kinderdorf International to ascertain whether it is willing to become involved in the project.

Budget

158. The Yemeni Government will assist in obtaining the plot of land, in paying the salaries of the staff and in defraying the village's monthly expenses:

Cost of land: approximately 2,500,000 Yemeni rials.

Salaries and wages: 20 x 12 x 6,000 = 1,440,000 Yemeni rials.

Monthly cost of each house: 12,000 x 12 x 20 = 2,880,000 Yemeni rials.

Foreign support

159. SOS Kinderdorf International would participate as follows:

Construction of the village in accordance with the specifications prepared by the organization for that purpose;

Equipment and furnishing of the village buildings;

Purchase of a bus to transport the children from their houses to government schools in the vicinity of the village.

### D. Plan of action for the opening of a social welfare department at the Faculty of Education of Sana'a University

Identification of the problem

160. Many public and private bodies providing educational, social, health, informational, cultural, recreational and other services are suffering from serious shortcomings in the institutional care they offer to beneficiaries because of the lack of professional staff qualified in the field of individual and community service.

Justification

161. Given the extent and complexity of child welfare and of children's needs for a sound and harmonious upbringing, and in view of the emergence of institutional child welfare services in various government bodies dealing with child-rearing and education, as well as the existence of other institutions providing individual and community services, it has become necessary to set up a specialized department that can play a beneficial role in comprehensive development encompassing all aspects and sectors of society. One cannot speak of comprehensive development where one component is developed at the expense of another. Social development goes hand in hand with economic, cultural and political development since they all serve the same aim of promoting the welfare of the human person as the means and end of development.

162. It is therefore necessary to set up a department that can organize and coordinate social services in every field so that they reach all beneficiaries and have a tangible impact on both individuals and groups. The most important of these services consists in proper child-rearing through the provision of care, education and recreation, to which may be added the scientific and objective steering of society towards the highest goal of these services, namely the creation of a society based on solidarity, cohesion and awareness of rights and duties.

163. Emphasis will be on the training and professional development of social scientists, enhancing their awareness and promoting an enlightened approach to the task of serving individuals and groups and remedying existing shortcomings, and on the provision of access to relevant studies, books and publications and development of social work in the department, with emphasis on the practical application of fieldwork techniques. These techniques have been almost entirely neglected in the case of social science graduates of the Faculty of Arts, the Sociology and Psychology Department and the Faculty of Education.

164. If social scientists are trained in accordance with scientific methods that take account of prevailing social conditions, they will play a major role in the design and preparation of programmes of services in all fields. They will also be in a position to identify shortcomings, to take steps to redress them and to prevent them from spreading.

Aim

165. The aim of the department will be the provision of qualified personnel to work in the following fields:

(a) Social welfare services relating to education and educational establishments such as schools, colleges, homes and centres for the disabled, juveniles and the elderly, cultural and sports clubs, adult education classes, crèches and kindergartens;

(b) Social welfare services relating to employment, including counselling, rehabilitation and vocational training programmes;

(c) Social welfare services relating to public health and social programmes, including medical care, such as hospitals and mother and child welfare programmes, involving, inter alia, provision of the requisite assistance through contacts with individual and group services;

(d) Social welfare services relating to social security and health insurance and retirement programmes;

(e) Social welfare services relating to legal matters, including juvenile and personal status courts, and provision of legal assistance for the families of juveniles, the disabled, the homeless and low-income groups;

(f) Social welfare services relating to housing, that is to say analysis and improvement of children's living conditions and studies of child adjustment in residential zones with a view to promoting the social changes needed to enhance the cohesion of these communities, which may influence children for better or worse through family and community values and standards.

Means

166. The following means will be employed to achieve the aim of the department:

(a) Recruitment of qualified third-level teaching staff specializing in social welfare;

(b) Preparation of integrated social welfare curricula and provision of technical and administrative facilities and qualified teachers of social welfare subjects;

(c) Provision of lecture halls and appropriate reference material;

(d) Adoption of an official decision to open a social welfare department at Sana'a University.

Measures

167. The Faculty of Education of Sana'a University will take action to establish the department and the corresponding proposal will be submitted, first to the Faculty Board and then to the Governing Board of the University, with a view to its adoption and approval. Channels of communication with international organizations would be opened with a view to securing their involvement in material and technical support for the establishment of the department.

Budget

168. The budget for the department would be incorporated in the Faculty budget and investment programme. Coordination with the Faculty of Education of

Sana'a University would be undertaken with regard to the opening of a social welfare studies department, the budget of which would be drawn from the following sources:

Estimated budgetary contribution of the Government: US$ 3 million.

United States Agency for International Development: US$ 3 million.

UNESCO: US$ 500,000.

Estimated total for the Government and donor agencies: US$ 6.5 million.

Summary

169. The Republic of Yemen ratified the Convention on the Rights of the Child in 1991 and took wide-ranging steps to implement its provisions, adopting legislation and announcing the establishment of a Higher Council for Maternal and Child Welfare in 1991.

170. The statistics show that the prevailing economic and political situation impedes full implementation of the Convention and that the emergence of certain practices constitutes an obstacle to sound child development, for example the spread of begging and vagrancy among children and rising disability ratios as a result of the prevailing economic and social circumstances and the wars and conflicts that have led to a reduction in family income levels or the loss of a breadwinner.

171. The statistics show that educational programmes and policies do not correspond to the present size of the population and fail to meet children's real educational needs. The ratio of children benefiting from education to the total population is only 54 per cent. Full educational coverage for children has not been achieved because the principles and goals announced are out of tune with reality. Free education does not cover educational requisites and does not imply exemption from fees. Moreover, the public authorities have not yet been able to enforce compulsory education or ensure equality of opportunity in education despite the fact that schools now exist even in remote regions of the country.

172. Although the public authorities are aware of the need to provide for child welfare and although the media and cultural channels are used to further that aim, Yemeni children do not benefit from such services as they should. Although radio broadcasting began as early as 1959 and television transmissions in 1965, the programmes have not fired children's imagination, responded to their aspirations or contributed to their development because of the lack of material and technical resources and the fact that media coverage does not extend to all parts of the country.

173. The statistics indicate that the number of children benefiting from health services is steadily declining because of the inadequacy of children's health care, the increase in population growth compared with available health services and the high illiteracy rate, especially among people in rural areas, who account for 81 per cent of the population of Yemen.

174. In the case of social services, lack of resources and of sufficient qualified social welfare personnel has led to a deterioration in child welfare services and the emergence of psychological and social problems among children. The increase in the number of disabled and homeless children has delayed attendance to the humanitarian needs of children eligible for such assistance.

175. The difficulties currently facing children in Yemeni society are attributable to social, economic and political problems. Any improvement in these conditions requires more support and a concerted effort by international, private and government agencies and institutions to implement child welfare projects that correspond to the provisions of the Convention on the Rights of the Child and translate Yemeni legislation into practical action that provides children with care, protection and support.

## References

Detailed bibliographical references and marginal notes appended to the report are available for consultation in the secretariat.

Annex I

Total number of schools and classes and of teachers and students, by sex at all levels of general and religious education

| Level | Basic | 3-year secondary | 4-year secondary |
|---|---|---|---|
| Schools | 8 533 | 738 | 77 |
| Classes | 63 569 | 2 925 | 991 |
| Students (male) | 63 569 | 97 693 | 28 277 |
| Students (female) | 524 855 | 10 724 | 11 806 |
| Total students | 2 059 502 | 114 717 | 40 083 |
| Male teachers | 42 757 | 3 765 | 635 |
| Female teachers | 9 739 | 528 | 825 |
| Total teachers | 52 496 | 3 607 | 2 146 |
| Yemeni teachers | 45 926 | 903 | 2 012 |
| Non-Yemeni teachers | 6 570 | 2 704 | 134 |
| Science colleges | 213 480 | 13 572 | |
| Males | 162 510 | 19 840 | |
| Females | 50 576 | 1 865 | |
| Teachers | 8 633 | 6 144 | |
| Religious schools | 1 000 | 282 | |
| Classes | 4 536 | 755 | |

Source: Educational Statistics and the Central Statistical Office (1992).

## Annex II

### Population distribution by sex and age group (1988-1990)

| Sex / Age group | Male | | | Female | | |
|---|---|---|---|---|---|---|
| | 1988 | 1989 | 1990 | 1988 | 1989 | 1990 |
| 0 - 4 | 1 176 900 | 1 200 680 | 1 212 410 | 1 519 410 | 1 183 820 | 1 190 600 |
| 5 - 9 | 959 620 | 979 390 | 1 030 000 | 888 590 | 935 280 | 977 460 |
| 10 - 14 | 696 940 | 796 000 | 169 930 | 621 030 | 664 330 | 713 460 |
| 15 - 19 | 480 490 | 517 600 | 555 730 | 475 980 | 496 820 | 518 070 |
| 20 - 24 | 317 470 | 338 950 | 366 030 | 376 690 | 386 620 | 401 310 |
| 25 - 29 | 264 570 | 269 400 | 274 060 | 355 070 | 355 560 | 354 360 |
| 30 - 34 | 231 480 | 234 650 | 238 970 | 314 360 | 320 050 | 325 980 |
| 35 - 39 | 210 970 | 213 220 | 214 810 | 365 180 | 273 110 | 279 990 |
| 40 - 44 | 180 380 | 184 140 | 188 220 | 205 230 | 212 960 | 222 060 |
| 45 - 49 | 154 480 | 154 510 | 155 970 | 172 230 | 174 950 | 177 820 |
| 50 - 54 | 137 270 | 142 520 | 143 560 | 143 560 | 147 110 | 119 070 |
| 55 - 59 | 112 560 | 114 700 | 119 300 | 212 370 | 115 090 | 119 070 |
| 60 - 64 | 91 800 | 88 580 | 87 820 | 87 820 | 95 400 | 91 500 |
| 65 - 69 | 66 610 | 66 070 | 65 880 | 67 810 | 98 540 | 69 780 |
| 70 - 74 | 53 290 | 47 120 | 43 670 | 56 860 | 49 070 | 44 940 |
| 75 | 74 550 | 71 830 | 69 260 | 84 440 | 18 370 | 78 320 |
| Total | 5 210 170 | 5 419 360 | 5 535 620 | 7 586 630 | 5 590 150 | 5 716 860 |

Source: Central Statistical Office, Statistical Yearbook for 1992.

## Annex III

## Figures for children attending kindergartens

## Academic year 1993/94

| Governorate | Public kinder-gartens | Number of pupils | | Total | Private kinder-gartens | Number of pupils | | Total |
|---|---|---|---|---|---|---|---|---|
| | | M | F | | | M | F | |
| City of Sana'a | 3 | 158 | 115 | 273 | 15 | 607 | 488 | 1 095 |
| Aden | 14 | 2 114 | 1 818 | 3 932 | - | - | - | - |
| Lahej | 3 | 118 | 109 | 227 | - | - | - | - |
| Abyan | 7 | 599 | 696 | 1 295 | - | - | - | - |
| Shabwah | 5 | 364 | 307 | 671 | - | - | - | - |
| Hadhramaut | 6 | 1 147 | 1 011 | 2 158 | - | - | - | - |
| Mahra | 4 | 206 | 251 | 457 | - | - | - | - |
| Ta'izz | 2 | 82 | 187 | 269 | 1 | 70 | 70 | 140 |
| Hudayda | - | - | - | - | 3 | 24 | 24 | 58 |
| Ibb | - | - | - | - | 2 | 35 | 35 | 82 |
| Al-Baida* Mahwit | 1 | 2 | 2 | 4 | - | - | - | - |
| Total | 45 | 4 790 | 4 496 | 9 286 | 21 | 736 | 617 | 1 375 |

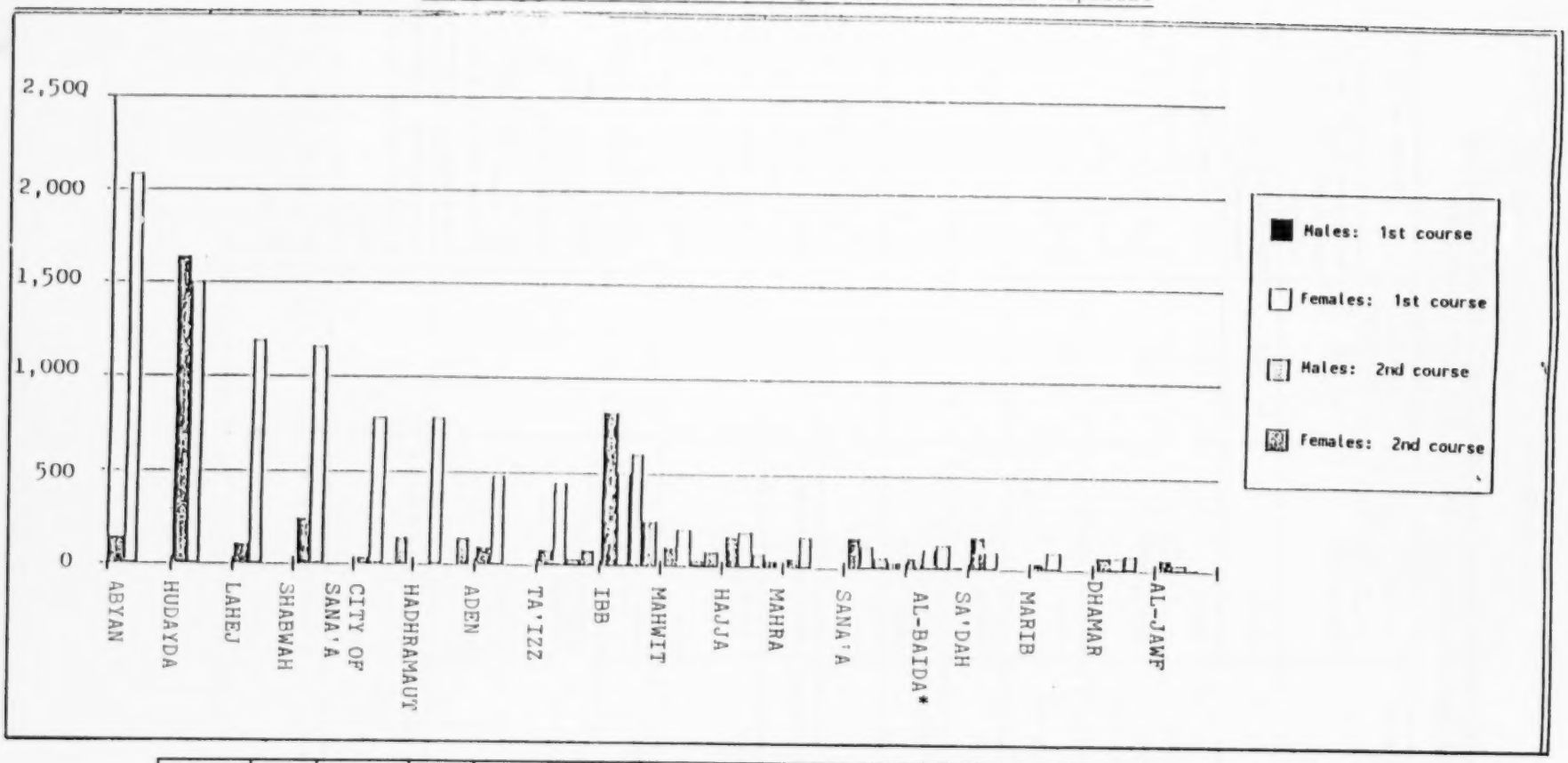
## Annex IV

## Specialized associations and benevolent associations and activities offering family and child services

| No. | Name of association | Location of activities | Date of establishment | Groups served |
|---|---|---|---|---|
| 1 | Association for Motor-Handicapped Persons | Sana'a, Aden | 1988 | Motor-handicapped persons of both sexes, especially children |
| 2 | Welfare Society for the Deaf and Dumb | Sana'a | 1989 | Persons with aural and speech impairments |
| 3 | Welfare Society for the Mentally Handicapped | Sana'a | 1993 | Mentally-handicapped children |
| 4 | Yemeni Welfare and Rehabilitation Society for the Blind | Sana'a, Aden | 1989 | Blind persons of both sexes, specializing in child rehabilitation |
| 5 | Welfare and Rehabilitation Society for the Disabled | Lahej | 1993 | Rehabilitation of the disabled |
| 6 | Yemeni Paediatrics Society | Sana'a | | Children's health care |
| 7 | Yemeni Women's Society | In several governorates | | Welfare of women and children: social, educational, vocational, recreational and cultural welfare and rehabilitation |
| 8 | Yemeni Women's Federation | " | | |
| 9 | Benevolent Social Reform Society | Most governorates | | Support and projects for the protection of orphans |
| 10 | Yemen Red Crescent Society | " | | Material support, assistance in kind, health care and relief for families in distress |
| 11 | Yemeni Volunteers Society | Sana'a | 1993 | Family and child welfare, counselling and guidance |
| 12 | Al-Hikma Society of Yemen | Sana'a, Ta'izz, Hudayda | | Material support and assistance in kind for children and their families, who are helped to look after and rehabilitate their children and to protect them from begging and vagrancy |
| 13 | Local authority councils | In every governorate | | Family welfare; establishment of educational and recreation centres |
| 14 | Family Development Society | In every governorate | | Marginalized groups reduced to the lowest levels of society |

Annex V

Number of students, by sex, attending literacy classes during the 1992/93 academic year in all governorates of the Republic




| | ABYAN | HUDAYDA | LAHEJ | SHABWAH | CITY OF SANA'A | HADHRAMAUT | ADEN | TA'IZZ | IBB | MAHWIT | HAJJA | MAHRA | SANA'A | AL-BAIDA* | SA'DAH | MARIB | DHAMAR | AL-JAWF |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Males: 1st course | 140 | 1 638 | 100 | 240 | 35 | 0 | 90 | 80 | 820 | 101 | 164 | 45 | 156 | 58 | 170 | 38 | 69 | 64 |
| Females: 1st course | 2 080 | 1 503 | 1 200 | 1 160 | 791 | 791 | 485 | 449 | 500 | 194 | 183 | 160 | 119 | 101 | 95 | 90 | 69 | 33 |
| Males: 2nd course | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 40 | 600 | 40 | 66 | 0 | 60 | 122 | 0 | 0 | 87 | 12 |
| Females: 2nd course | 0 | 0 | 0 | 0 | 136 | 136 | 0 | 85 | 240 | 85 | 31 | 0 | 34 | 15 | 0 | 0 | 0 | 0 |

Annex VI

Social institutions serving homeless and delinquent children and number of beneficiaries from the date of establishment until 1993

| Year / Name of institution | 1979 | 1980 | 1981 | 1982 | 1983 | 1984 | 1985 | 1986 | 1987 | 1988 | 1989 | 1990 | 1991 | 1992 | 1993 | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| City of Sana'a | 48 | 72 | 130 | 160 | 173 | 104 | 98 | 88 | 80 | 98 | 125 | 125 | 155 | 152 | 157 | 1 765 |
| Aden Centre | - | - | - | - | - | - | - | - | - | - | - | 18 | - | - | - | 18 |
| Ta'izz | 32 | 33 | 73 | 93 | 104 | 91 | 88 | 54 | 57 | 57 | 50 | 62 | 46 | 64 | 62 | 966 |
| Hudayda | 65 | 63 | 77 | 92 | 100 | 59 | 76 | 42 | 75 | 83 | 67 | 72 | 83 | 92 | 69 | 1 115 |
| Ibb | 37 | 33 | 54 | 58 | 64 | 75 | 72 | 49 | 52 | 47 | 54 | 39 | 49 | 50 | 53 | 786 |
| Sa'dah | - | - | - | - | - | - | - | - | - | 18 | 11 | 10 | 10 | - | - | 49 |
| Total | 182 | 201 | 334 | 403 | 441 | 329 | 334 | 233 | 264 | 303 | 307 | 326 | 343 | 358 | 341 | 4 699 |

Annex VII

Public and private centres for the disabled: services and programmes

| Name of institution | Region | Disability | Responsible authority | Capacity | Type of service | Number of beneficiaries | Educational programmes | Vocational training programmes | Additional activities |
|---|---|---|---|---|---|---|---|---|---|
| Al-Nur Centre | Sana'a | Blind | Social security | 50 | Education and care | 108 | Braille tuition to preparatory level | None | Cultural, social, recreational, musical |
| Al-Nur Institute | Aden | Blind | Social security | 50 | Education, care and rehabilitation | 25 | Braille tuition | Wickerwork training | Cultural, social, recreational, musical |
| Al-Nur Institute | Mukalla | Blind | Social security | 50 | Education, care and rehabilitation | 80 | Braille tuition | Wickerwork, bookbinding, carpentry, stonework | Cultural, social, recreational, musical |
| Cognitive Development Centre | Sana'a | Deaf, dumb and mentally retarded | Social security and the local council | 120 | Education and rehabilitation | 238 | Special tuition for the deaf | Carpentry, printing, knitting, upholstery, bookbinding, agriculture | Cultural, social, recreational, sports, musical |
| Rehabilitation Centre for the Disabled | Aden | Motor handicapped | Social security | 60 | Education and rehabilitation | 50 | Literacy | Printing, secretarial work, knitting, sewing, carpentry | |
| Project for rehabilitation of the disabled within society | Ta'izz Lahej | All disabilities | Social security | Open | Consciousness-raising and education | 278 | Consciousness-raising and education | None | None |
| Early home education project for mothers of disabled children | Sana'a | All disabilities | Social security | 80 | Consciousness-raising and education | 63 | Education and training programmes for mothers of disabled children | None | None |
| Rehabilitation and Natural Therapy Centre | Sana'a | Motor handicapped | Health | Open | Natural therapy, prostheses, prosthetic equipment | Open | None | None | None |
| School for the Deaf | Hudayda | Deaf and dumb | Local council | 30 | Education | 50 | Special tuition for the deaf: lip-reading and sign language | None | Cultural, social, recreational |

Annex VII (continued)

Public and private centres for the disabled: services and programmes

| Name of institution | Region | Disability | Responsible authority | Capacity | Type of service | Number of beneficiaries | Educational programmes | Vocational training programmes | Additional activities |
|---|---|---|---|---|---|---|---|---|---|
| School for the Deaf | Zabid | Deaf and dumb | Education: Literacy Department | 40 | Education and rehabilitation | 48 | Special tuition for the deaf: lip-reading and sign language | Sewing, handicrafts | Cultural, social, sports, recreational |
| Rehabilitation Centre for the Disabled | Ta'izz | Deaf, dumb and mentally retarded | Hayel Sa'id Group | - | - | - | - | - | |
| Home for the Elderly and Disabled | Sana'a | All disabilities and the elderly | Local council | 80 | Care, accommodation | 125 | None | None | None |
| Home for the Elderly | Aden | The elderly | Social security | 150 | Care, accommodation | 45 | None | None | |
| Al-Salaam Sanatorium | Hudayda | Mental illness | Social security | 150 | Care, accommodation, therapy | 245 | None | None | |
| City of Light | Ta'izz | Leprosy | Health | | | | | | |
| Al-Salaam Hospital | Aden Sana'a | Mental illness | Health | | | | | | |
| Mental Sanatorium for Women | Sana'a | Mental illness | Reform Society | 34 | Mental care and therapy | 28 | None | None | |
| Society for Motor Handicapped Persons | Sana'a | Motor handicapped | Society for the Disabled | 30 | Education, rehabilitation | 225 | Literacy | Printing, knitting, sewing, handicrafts | |
| Mental Sanatorium | Sana'a | Mental illness | Health | | | | | | |
| Mental Sanatorium at the Central Prison | Sana'a | Mental illness | Interior | Open | | 220 | None | None | None |
| Home for the Elderly | Hudayda | The elderly | Social security | 600 | Care, accommodation | 285 | None | None | None. Recreational outings |